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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Thackeray et al.

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FOR: ANTIHALATION COMPOSITIONS

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to Assistant Commissioner for Patents, Washington, D.C. 20231 on 2/5/02.

By:


Deanna M. Rivernider

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Assistant Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

Pursuant to 37 C.F.R. §§ 1.97 and 1.98, applicant(s) hereby submit(s) an Information Disclosure Statement for consideration by the Examiner.

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I. LIST OF PATENTS, PUBLICATIONS OR OTHER INFORMATION

The patents, publications or other information submitted for consideration by the Examiner are listed on the PTO-1449 form, attached hereto.

II. COPIES

Submitted herewith is a legible copy of (i) each U.S and foreign patent or English abstract of foreign patent; (ii) each publication or that portion which caused it to be listed; and (iii) all other information or that portion which caused it to be listed.

III. CONCISE EXPLANATION OF THE RELEVANCE

All of the patents, publications or other information are in the English language or were cited in an English language Search Report, a copy of which is attached hereto (concise explanation not required).

FEES

IV. THIS IDS IS BEING FILED UNDER 37 C.F.R. § 1.97(b)

(check one box)

- a. ☐ within three months of the filing date of a national application (37 C.F.R. § 1.97(b) (1)). No fee or certification is required.
- b. ☐ within three months of the date of entry of the national stage as set forth in §1.491 in an international application (37 C.F.R. § 1.97(b) (2)). No fee or certification is required.
- c. ☒ before the mailing date of a first Action on the merits (37 C.F.R. § 1.97(b) (3)). No fee or certification is required. In the event that a first Office Action on the merits has been issued, please consider this IDS under 37 C.F.R. § 1.97(c) and see the certification under 37 C.F.R. § 1.97(e) below, or, if no certification has been made, charge our deposit account a fee in the amount of \$240.00 as required by 37 C.F.R. § 1.17(p).

V. THIS IDS IS BEING FILED UNDER 37 C.F.R. § 1.97(c):

(check one box)

before the mailing date of a Final Office Action under 37 C.F.R. § 1.113 (See 37 C.F.R. § 1.97(c) (1)) or before the mailing date of a Notice of Allowance under 37 C.F.R. § 1.311 (See 37 C.F.R. § 1.97(c) (2)).

- a. ☐ No certification; therefore, a fee in the amount of \$180.00 is required by 37 C.F.R. . § 1.17(p).
- or
- b. ☐ See the certification below. No fee is required.

VI. CERTIFICATION UNDER 37 C.F.R. § 1.97(e) (check only one box)

The undersigned hereby certifies that

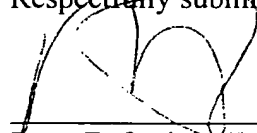
- a. ☐ each item of information contained in the IDS was cited in a communication from a foreign Patent Office in a counterpart foreign application not more than three months prior to the filing of this IDS;
or

- b. ☐ no item of information contained in the IDS was cited in a communication from a foreign Patent Office in a counterpart foreign application or, to the best of my knowledge after making reasonable inquiry, was known to any individual designated in 37 C.F.R. § 1.56(c) more than three months prior to the filing of this statement.
- c. ☐ Some of the items of information were cited in a communication from a foreign Patent Office. As to this information, the undersigned certifies that each item of information contained in the IDS was cited in a communication from a foreign Patent Office in a counterpart foreign application not more than three months prior to the filing of this IDS. As to the remaining information, the undersigned hereby certifies that no item of this remaining information contained in the IDS was cited in a communication from a foreign Patent Office in a counterpart foreign application or, to the best of my knowledge after making reasonable inquiry, was known to any individual designated in 37 C.F.R. § 1.56(c) more than three months prior to the filing of this statement.

- ☐ Enclosed please find a check in the amount of \$_____ for the above indicated fee.
- ☐ Please charge Deposit Account No. 04-1105 in the amount of \$180.00 for the above-indicated fee. A triplicate copy of this paper is attached.
- ☒ No fee is required.

If the Examiner has any questions concerning this IDS, he/she is requested to contact the undersigned. If it is determined that this IDS has been filed under the wrong rule, the PTO is requested to consider this IDS under the proper rule (with a petition, if necessary) and charge the appropriate fee to Deposit Account No. 04-1105.

Respectfully submitted,



Peter F. Corless (Reg. No. 33,860)
EDWARDS & ANGELL, LLP
Dike, Bronstein, Roberts & Cushman, IP Group
P.O. Box 9169
Boston, MA 02209
(617) 523-3400